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Application Number: 10/791,996

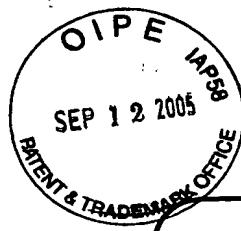
Filing Date: March 3, 2004

Applicant: Carmen Flosbach

Title: Coating Agents and a Process for the Preparation of Multi-Layer Coatings

Attorney Docket: FA1013 US DIV

- Transmittal Form
- Amendment and Response to Final Office Action of April 08, 2005, Response to July 29, 2005 Advisory Action, and Request for Continued Examination Under 37 CFR 1.114
- Fee Transmittal Form
- Request for Continued Examination Form
- Extension of Time (2 months)
- Receipt Card



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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

16

Application Number	10/791,996
Filing Date	March 3, 2004
First Named Inventor	Carmen Flosbach
Group Art Unit	1762
Examiner Name	Elena Tsoy

Attorney Docket Number

FA1013 US DIV

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request (2 months)  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <ul style="list-style-type: none"> <li>• Amendment and Response to Final Office Action of April 08, 2005, Response to July 29, 2005 Advisory Action, and Request for Continued Examination Under 37 CFR 1.114</li> <li>• Request for Continued Examination Form</li> <li>• Certificate of Mailing</li> <li>• Receipt Card</li> </ul>
	Remarks	

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Hilmar Fricke (Registration No. 22,384)
Signature	
Date	September 8, 2005

### CERTIFICATE OF MAILING

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Signature	
Date	September 8, 2005

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# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1240.00)

## Complete if Known

Application Number	10/791,996
Filing Date	March 3, 2004
First Named Inventor	Carmen Flosbach
Examiner Name	Elena Tsoy
Group / Art Unit	1762
Attorney Docket No.	FA1013 US DIV

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None Deposit Account:Deposit Account Number **04-1928**Deposit Account Name **E.I. du Pont de Nemours and Company**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	1000	201	500
106	430	206	215
107	660	207	330
108	1400	208	700
114	200	214	100

## SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

Total Claims	-20	= 0	X 50	=	Extra Claims	Fee from below	Fee Paid
Independent Claims	-3	= 0	X 200	=			
Multiple Dependent			X 360	=			

## Large Entity Small Entity

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	Fee Description
103	50	Claims in excess of 20
102	200	Independent claims in excess of 3
104	360	Multiple dependent claim, if not paid
109	200	** Reissue independent claims over original patent
110	50	** Reissue claims in excess of 20 and over original patent

## SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	120	215	60
116	450	216	225
117	1020	217	510
118	1,590	218	795
128	2,160	228	1,080
119	500	219	250
120	500	220	250
121	1000	221	500
138	1,510	138	1,510
140	500	240	250
141	1,500	241	750
142	1,400	242	700
143	800	243	400
144	100	244	550
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	790	246	395
149	790	249	395
179	790	279	395
169	900	169	900

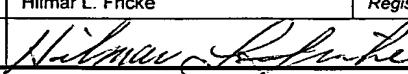
Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$1240.00)

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Hilmar L. Fricke	Registration No. Attorney/Agent)	22,384	Telephone	(302) 984-6058
Signature				Date	September 8, 2005

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